



# SIGN PERMIT

Town of Jaffrey

Application Fee: \$30

**Building Inspector**

(603) 532-7445

Fax (603) 532-7862

rdeschenes@townofjaffrey.com

Map & Lot #

Permit #: \_\_\_\_\_

Date: \_\_\_\_\_

Applicant's Name: \_\_\_\_\_ Owner of Record: \_\_\_\_\_

Address: \_\_\_\_\_ Phone: \_\_\_\_\_

Address/Location of proposed sign: \_\_\_\_\_

Map & Lot # \_\_\_\_\_ District: \_\_\_\_\_ Are you in the historic district? YES or NO

Dimensions of proposed sign: \_\_\_\_\_ Construction of sign: \_\_\_\_\_

Will the proposed sign be **PERMANANT** or **TEMPORARY** from (date) \_\_\_\_\_ to (date) \_\_\_\_\_

\*Signature of Applicant \_\_\_\_\_ Date Paid: \_\_\_\_\_ Check # \_\_\_\_\_

*\*Signing this permit automatically gives permission for a site inspection (sign placement) on your property.*

**- Please provide a plot plan showing the location of the sign on property or building -**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Property Address: \_\_\_\_\_

**For Town Office Use Only**

Approved by Building Inspector: \_\_\_\_\_ Date: \_\_\_\_\_

Approved by DPW: \_\_\_\_\_ Date: \_\_\_\_\_

Not Approved \_\_\_\_\_ Reason: \_\_\_\_\_

Referred to: BOS \_\_\_\_\_ ZBA \_\_\_\_\_ PB \_\_\_\_\_ Historic District \_\_\_\_\_

Approved by Board(s) above: \_\_\_\_\_ Date: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_